FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees THICS AND for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed in STATE IN THE RESERVENCE IN THE R electronically.

Effective May 1, 2010, all statements and reports for State PACs and State
Parties must be filed electronically.

Reset Form

		1		
COMMITTEE NAME (Must be same as on Statement of Organ	ization)			
Waits for Appanoose County Board of Supervisors		1 1	ORM OR-2	DISCLOSURE
IMPORTANT: Indicate by # type of committee you are reporting for: 5 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (9) City PAC (10) School Bc 11) Local Ballot Issue	State PAC (3)State Party ate (7)School Board or Other Political	(Re	v. 12/2009) Office Use On	REPORT
CANDIDATE COMMITTEES ONLY: Candidate Name Mark Waits Office Sought Board of Supervisors	Political Party (if applicable) Republican District (if Senate or House) Appanoose County	Sca	nned	
Late reports are subject to possible civil and criminal penalties. Purs candidate's committee, and the chairperson, for any other type of co	uant to lowa Code sections 68B.32A(7 mm/ttee, is the individual responsible for	and 68A. or filing tim	401(3), the ca	ndidate, for a ate reports.
LOTO C KELLY SIGNATURE OF PERSON FILING REPORT	1641-8570-8195 TELEPHONE		1-05 DATES	IGNED
IAMFILINGA January 19 2015			LECTION YE	AR.
(report date)	Indicate by #	1		
CHECK IF AMENDMENT TO REPORT DATED	L	ocal Comm	lttees, enter Da	ite of Election
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.)	Dissolution Form DR-3.	hich Election	cal Committees on is held	s, enter County In
		Аррапоо:	se County	
STATEMENT OF CASH ON HAND		-тррапоо:	se County	
STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the call of the last reporting period or must be zero if this is first	al of all funds held by the	TO COM S THE PLEASE OF		60.35
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For Instructions, See Back of Form	Reset Form	SCHEDULE	
CONTRIBUTIONS - MONEY TAKEN IN (Including candidate's personal funds)	LAMPA	(Rev. 12/13)	MONETARY
COMMITTEE NAME (Must be same as on Statement of Organization) Waits for Apparouse County Board of Superviors	2015		CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information capied from reports and statements for soliciting contributions or for any

OR DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	FUND- RAISER INCOME
/	ID#	Markwaits		,200°	-
22/14	CK#	11 01 2001 3	Self	de	
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		TOTAL (if last pa	ge of this schedule)	· Byou	
sclosure law n	equires candidate committe	ees to disclose the relationship of any relative making a contribute third degree of consanguinity (blood relatives) and affinity (n	ution to the	300	

applicable" in the relationship column. (for Schedule A) FOR INSTRUCTIONS, SEE BACK OF FORM

	PARTICIPATION OF THE PARTICIPA
A FTHICK AND	Reset Form
ALL COLUMN	Laminaconstruction

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	K THIS BOX IF

COMMITTEE NAME (Must be san	e as on Statement of Organization)
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Waits for Appanoose County Board of Supervisors

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
922/14	CK# G	KOG Radio/RNGO Centerville IA	Radiu ads	3 300 cm
123/14	CK# 7	Daily Joulgian Centervile JA	Newspaperads thank you ad	[09.80
14/14	CK# 8	Walmart Centerulie IA	Food and supplies	50,00
12115	ID# CK#	towatrustand sources Bonk	account	559
	ID#			
	ID# CK#			
	ID# CK#			A
MI MIN 1849 DE LES MINISTRES DE LES MINISTRES DE LA COMP	ID# CK#			

THIS	BOX	APPLIES	TO	CANDIDA	TES'	COMMIT	TEES	ONLY	
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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page		of	

TOTAL (If last page of this schedule)

(for Schedule B)